#### **Late Contribution Report**

## Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER Das Williams for Assembly 2010			Date of This Filing	3/17/2010	Date Stamp	CALIFORNIA FORM 497
AREA CODE/PHONE NUMBER (805)563-1049	I.D. NUMBER (if applicable) 1316591		Report No0	31610-1		For Official Use Only
STREET ADDRESS	,		Amendment to Report No.	001	Page 1 of 3	
CITY Santa Barbara	STATE CA	ZIP CODE 93101	(explain below)  No. of Pages	3		

#### Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
03/15/2010	Barona Band of Mission Indians Lakeside, CA 92040	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$2,500.00
03/16/2010	Christopher E. Edgecomb Santa Barbara, CA 93109	IND COM OTH PTY SCC	Chief Executive Officer Sirius Telecom	\$3,000.00
03/16/2010	Live Food Products, Inc. & Health Science Goleta, CA 93117	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$1,000.00

\*Contributor Codes

IND - Individual PTY - Political Party

COM - Recipient Committee (other than PTY or SCC) SCC - Small Contributor Committee

OTH - Other

Reason for Amendment:

Update contributor name

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

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CITY Santa Barbara	STATE CA	ZIP CODE 93101	(explain below)  No. of Pages3	_	

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
03/16/2010	Political Action By Pest Control Operators Sacramento, CA 95814	☐ IND ■ COM □ OTH □ PTY □ SCC		\$1,500.00
03/15/2010	State Building & Construction Trades Council of California PAC Sacramento, CA 95814  ID# 743501	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$2,800.00
03/15/2010	Viejas Tribal Government Alpine, CA 91901	☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC		\$2,500.00

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STREET ADDRESS		Amendment to Report No	Page 3 of 3		
CITY Santa Barbara	STATE CA	ZIP CODE 93101	(explain below)  No. of Pages3		

## Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment:

Update contributor name